

Agenda  
LHD Open Line Call  
Tuesday, January 20<sup>th</sup>, 9:30 – 11:00 AM

1. General Updates:

- a. MDCH is now responsible for monitoring temperatures and determining when to interrupt or postpone shipments due to freezing temps. If the temperature is predicted to be 10 degrees or below for several days, vaccine should not be shipped. Dianne Matelsky (MDCH) is keeping weekly temperature reports. McKesson will ship unless notified by MDCH. They prefer that we hold vaccine for the entire state, but if that is not practical, we need to provide them with zip codes. Vacman was down again last week. Orders were entered on Monday and a majority was shipped yesterday. UP orders were not entered, but we anticipate entering/shipping next week. MDCH held back on data entry for the UP, instead of having McKesson hold the vaccine (the order just didn't go in). Group discussed holding vaccine versus not entering data. LHDs are reminded to check the temperature monitors in the packaging to make sure vaccine is viable. **Action:** Terri will send e-mail to LHDs. Discussed difficult issues with this; don't know when it will be shipped, who is accountable etc. **Action:** Bob will call Minnesota and Wisconsin to see if they hold vaccine. Test studies with shipping.
  - b. Accountability policy to coordinate with MCIR VIM, an interim policy with definitions is due out soon. Definitions were reviewed at a Division meeting and sent out to MDCH staff for review and comment. **Action:** Rob Miller will release the interim policy by the end of the month.
  - c. MDCH, CDC and McKesson are working on FedEx delivery issues in certain regions. Eight complaints have been filed by McKesson to the shipping carriers.
  - d. VIM information biologic clerks email list completed. If you have any additions or changes please e-mail Nancy Tate, [TateN@michigan.gov](mailto:TateN@michigan.gov)
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VFC Update:

Hib vaccine and allocations

- a. Hib allocations are stable, should be sufficient to meet primary dose series. If not, please let MDCH VFC staff know if you

need an adjustment in your monthly allocation. This month, we allowed over-orders, but stopping an order entry is an issue. Please review your needs and those of your providers. If an adjustment is needed to an allocation, let MDCH know.

- b. Pentacel "fixing the error in MCIR": if medication error occurs (ie; given partial dose) it should be handled by the MCIR Regional staff. MDCH decided to keep it at that level, to avoid the message that separate antigen use is acceptable. Must contact LHD who will then work on education and will notify the MCIR Regional staff to correct error. (Q) Sue (Ottawa) asked what the difference is. (A) The issue may be that they are not using, mixing, or reconstituting both vials. Staff has to fix that in MCIR. Bea sent information to regional staff on how to do that. IAP should notify MCIR Regional staff to correct in VIM.

#### Flu vaccine

- a. LHDs should call MDCH if they need flu, there is still a small supply at McKesson.
- b. FluMist is expiring. The replacement policy is good until January 30<sup>th</sup>. We know many providers are choosing not to participate. Providers should be encouraged to replace the vaccine and if they choose not to, then it is considered a loss and should be documented appropriately. Expired vaccine should be sent to McKesson and include an accident loss report. Make sure MDCH gets a copy of the report.
- c. Preparing for pre-booking: Any LHDs who might want Novartis flu vaccine: Fluvirin, indicated for children 4 yrs and older added to the ordering options? It can be added but in the past has not been a popular option. Terri polled the group and most said "no" their providers did not want it. MDCH will only put sanofi and Medimmune products on the prebooking forms.

#### Vaccine orders

- a. VACMAN has been not working properly. LHDs need to be aware of this issue, as it may result in delay of vaccine to providers. MDCH still doesn't have historical vaccine data. Any data from November 14<sup>th</sup> on, can't look up orders. May be delays in orders, mainly because of weather.
- b. VFC Tip Sheet "Documents to Submit Guide" was updated to include the 7 day rule. It is posted on the website. Be sure biologic clerks are aware they don't need to submit documents monthly. Only submit when placing an order and documents should be for the PIN # that is ordering. The PIN# number

and documents should match. (Q) Suzette asked if we need to submit documentation if the order is only for HIB. (A) Terri answered yes because it is an order. (Q) Denise (Dickenson-Iron) asked if they submit quarterly/3 months. (A) Terri said yes from the last order.

- c. Requests for more guidance on how to review documentation for order approval at the LHD level. Field rep brought concerns to our attention at the Division staff meeting. Developing a tip sheet to review temp logs, doses admin, ending inventory reports and orders. It will be sent out soon. This will be a very detailed sheet. These are just suggestions. Don't have to do everything on the list.
4. VFC (draft) Tip Sheet on "Who to Contact" has 2 versions, one (1) for LHD use and one (1) to share with providers, please review. Reviewed tip sheets. Will be finalizing these versions soon
5. VFC Tip Sheet "Transfer out Issues", please review.
6. School Based Clinics: Difficulties with vaccine deliveries for variety of reasons; ie. They are only open for a few months, emergency issues, etc. Sometimes the vaccine delivery is managed by a hospital or FQHC. Considering conf. call with LHDs who have school based clinics to discuss strategies on how to coordinate, if any value? Group did think a call would be beneficial for those who have school based clinics.
7. VFC Resource Book for Providers will go live on the website, hopefully by the end of January. MDCH is trying to put forms in a format you can easily use (Word, Pdf). (Q) Sue asked if a paper version would also be available. (A) Some people are not on the computer a lot or have Pdf issues. Many automatically go to the book first. **Action:** Laura Korten said she will put a link on MCI R.org.

#### MCI R Update:

- a. Trunk release update. Internal testing is looking good.
  - b. Progress of getting providers on VIM: Started training again for 2009. There are 1290/1500 sites on VIM. Approximately 200 sites are not functional and need to get off the old VIM system. 22 have not had training.
- (Q) Sue Schryber asked about highlights of upcoming trunk release. Bea said she didn't have her them with her. **Action:** Bea will e-mail the list. Bob - not significant changes to functionality. It primarily sets the groundwork for e-ordering. (Q) Mary (Kent) said providers can't go back to LWB months later. Different steps

for each in an already balanced inventory. Bea said one of these reports is in the trunk. **Action:** Bea to call Mary and send via email to everyone. (Q) Pat White (Oakland) said this is an issue in a lot of counties. Janet said coverage level percents seem to be taking a dive. Bob agreed we are seeing a decline with WIC, DTaP 4, etc. Bob asked if there was a decline in recall activities. April (Wayne Co.) said yes, she used to personally do things to make sure rates increase and there just isn't time now. Jan (Macomb) said there is a discrepancy in some reports and the lowered rates could be a technical glitch. **Action:** contact Bea (LeAnn) about this. Sue commented that there is a big Pedvax vs Acthib Pediarix. Merck users are seeing a difference. It's a huge issue for providers only getting 5 doses of Acthib etc. Sue gave Terri a list of issues discussed at provider meeting who are having problems on the private side. Terri is working with the manufacturer on some of the issues.

Terri said that running the rates for the IAP plans really brought the dropping rates to our attention.

Roxanne asked about VFC/AFIX site visits to Pedvax Hib users and the accuracy of the AFIX reports? She is revising the report (as are other LHDs). (Q) Can we revise it for those using 2 doses to something more applicable? **Action:** completed. Stephanie Sanchez took care of this. An email went out to LHD IAP and she discussed at the INE meeting.

Karen asked if the form was on the website. **Action:** Terri thinks so but will check and let them know.

CDC Update: Liz – no report

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Best Practices:

Successful practices and tips on what works for them. Hope to get an article or letter for the Imms Newsletter. Contact field reps with providers who are doing really well with VIM and share their successes so others may benefit from it.

Next open call: To discuss and schedule. Group wants to continue Tuesday morning calls through 2009. **Action:** completed. Nancy to set up monthly calls.